

16085 U.S.PTO
042104

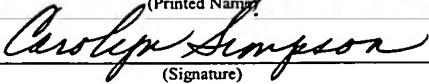
Atty. Dkt. No. 074313-0116

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Repp et al.
Title: CORNICE SYSTEM
Appl. No.:
Filing Date: 4/21/2004
Examiner:
Art Unit:

CERTIFICATE OF EXPRESS MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450.

EV 431601862 US (Express Mail Label Number)	4/21/04 (Date of Deposit)
Carolyn Simpson (Printed Name)	
 (Signature)	

22141 U.S.PTO
10/828835
042104**UTILITY PATENT APPLICATION
TRANSMITTAL**

Mail Stop PATENT APPLICATION
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Jilene A. Repp
N67 W30918 Golf Road
Hartland, Wisconsin 53029

Francis A. Yogerst
1131 Evergreen Street
West Bend, Wisconsin 53095

[X] Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

[X] Specification, Claim(s), and Abstract (27 pages).

[X] Drawings (7 sheets, Figures 1, 2, 3A, 3B, 3C, 3D, 3E, 3F, 4, 5, 6, 7, 8, 9).

[X] Application Data Sheet (37 CFR 1.76).

The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$770.00 =	\$770.00
Total Claims:	50	- 20	= 30	x \$18.00 =	\$540.00
Independents	4	- 3	= 1	x \$86.00 =	\$86.00
If any Multiple Dependent Claim(s) present:			+ \$290.00 =		\$0.00
Surcharge under 37 CFR 1.16(e) for late filing of Executed Declaration and late payment of filing fee			+ \$130.00 =		\$130.00
			SUBTOTAL: =		\$1526.00
[X]		Small Entity Fees Apply (subtract ½ of above):	=		\$763.00
			TOTAL FILING FEE: =		\$763.00

[X] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.

[] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

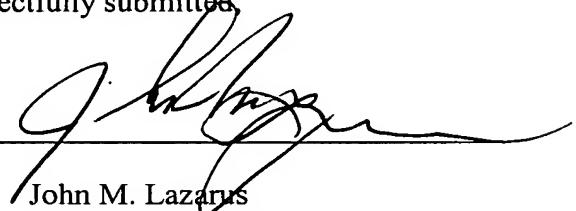
Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Date APRIL 21, 2004

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Respectfully submitted,

By



John M. Lazarus
Attorney for Applicant
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